

REGISTRATION AND ACCOUNT OPENING FORM - INDIVIDUALS

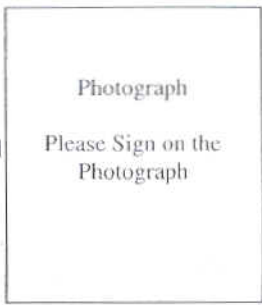
(This information is the sole property of the Trading member / Brokerage house and would not be disclosed to anyone unless required by law or except with the express permission of clients)

To



S. G. SECURITIES

Client Information : /



Member : National Stock Exchange of India Ltd.,

301-B, Sai Sadan, 76/78, Modi Street, Fort, Mumbai – 400 001. Tel. 4022 4545 / Fax 4022 4551

E-Mail : sgsec@vsnl.com, info@sgsecurities.com Website : www.sgsecurities.com

Email Id for Complaints: customer.care@sgsecurities.com

SEBI Registration No.: INB230794820 (Capital Market) / INF230794820 (Future & Option)

Clearing Member (Future & Option): **IL & FS Securities Services Limited**

IL & FS House, Raheja Vihar, Chandivli, Andheri (E), Mumbai – 400 072. Tel. No. 28570965

SEBI Registration No.: INF231133630 (Future & Option)

Dear Sir,

I request you to register me as your CLIENT and enable me to trade in the cash and derivatives segments pursuant to the Agreement entered into with you. I have read the Rules, Byelaws and regulations of the Exchanges pertaining to the cash & derivative segments and agree to abide by them. In this regard, I give the following information,

PERSONAL DETAILS (Please Fill Details in Block Letters)

• Full Name of Client: (As per PAN Card)

• Unique Identification

• Sex: Male Female Date of Birth : _____ Marital Status: _____

• Residential Status: Indian NRI Others _____

• Occupation

Salaried	Self Employed	Business	Professional	Housewife	Other
----------	---------------	----------	--------------	-----------	-------

• Address:

RESIDENCE:			OFFICE:		
			Employer / Establishment Name:		
City :		Pin Code:	City :		Pin Code:
State:	Country:	Nationality:	State:	Country:	Nationality:
Tel.: (R) _____ (M) _____		Tel.: (R) _____ (M) _____			
Fax: _____		Fax: _____			
Email Id:			Email Id:		

The Member discloses herewith that it undertakes proprietary trading in addition to client business

BANK & DEPOSITORY ACCOUNT DETAILS

- BANK ACCOUNTS DETAILS:** (Through which transactions will generally be routed.)

BANK NAME	BRANCH ADDRESS	ACCOUNT NO	MICR NUMBER	A/C TYPE

(Copy of a cancelled Cheque leaf / Pass book / bank statement containing name of the constituent should be submitted)

- DEPOSITORY ACCOUNT DETAILS.** (Through which transactions will generally be routed)

NAME & ADDRESS OF DP	DP ID	CLIENT ID	DEPOSITORY
			NSDL / CDSL

(Please provide details of all your demat accounts on a separate sheet in the format given above. Attach proof of Depository Account)

FINANCIAL DETAILS

Income Tax PAN Number (Please attach a copy of your PAN Card)									
---	--	--	--	--	--	--	--	--	--

- Financial Details of the Constituent** (Income Range per annum): Tick where applicable

Below Rs. 1,00,000/-		Rs. 1,00,000 To Rs. 5,00,000		Rs. 5,00,000 To Rs. 10,00,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rs. 10,00,000 To Rs. 25,00,000		Above Rs. 25,00,000				

INVESTMENT, TRADING DETAILS / TRADING PREFERENCE

- Years of Experience**

Capital Market	Yrs.	Derivative Market	Yrs.	Other Investments Related Fields	Yrs.	No prior Experience
----------------	------	-------------------	------	----------------------------------	------	---------------------

SEGMENTWISE CONFIRMATION

Exchange	Capital Market Segment	Derivatives Segment
NSE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Note : Please Sign The Box of Segments on which you wish to trade

- For NRIs Only**

Please tick if you are a	<input type="checkbox"/> NRO	<input type="checkbox"/> NRE	<input type="checkbox"/> NRI (Repatriable) / Non Repatriable
--------------------------	------------------------------	------------------------------	--

(1) PIS Ref. No. _____ (2) PIS Letter Date _____

Foreign Address : _____

MULTIPLE BROKER'S DETAILS (if any)

• Dealing with other Trading Member Yes No IF 'Y'

Name of Other Trading Member : _____

Name of Exchange NSE BSE Others _____

Client Code with Other Trading Member : _____

REFERENCE (INTRODUCERS DETAILS)

(INTRUDUCTION: Introduced by another constituent / Director or employee of trading member / any other person. Please Specify)

Introducer Full Name: _____ Introducer Client Code (if any): _____

Address: _____

Relationship of Introducer with S G Securities: _____ Introducer Signature : _____

Proof of Identification of Introducer : _____

NAME & DESIGNATION OF THE EMPLOYEE WHO HAD DONE IN-PERSON VERIFICATION OF CLIENT

• Name of Employee: _____ Designation _____

• In person verification done on _____ Signature : _____

For clients of Registered Sub-brokers

In person verification done in presence of Registered Sub-broker

Name _____ Signature : _____

DECLARATION

Details of any action taken by SEBI / Stock Exchange / Any other Authority for violation of securities laws/other economic offences _____

Whether you have been restricted by SEBI to deal in Capital Market? YES OR NO -

Are you employed with any other Trading Member? YES OR NO -

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting I am aware that I may be held liable for it.

SIGNED & DELIVERED BY

Name : _____



Place:

Date: